

Iowa Department of Education Division of Community Colleges and Workforce Preparation 400 E. 14<sup>th</sup> St. Des Moines, IA 50319-0146

## **GED Verification Request Form**

## **IMPORTANT:**

- The document you are requesting is NOT an official transcript or diploma.
- Verification letters may be faxed or emailed.
- We can only provide verifications for students who received their GED (High School Equivalency) Diploma in Iowa. We will inform you if the student is not in our database.
- Requests will not be processed without the signature of the GED graduate.
- Only the last four digits of the student's social security number will be included in the letter.
- Allow 4-5 business days for processing.

Name at the time of testing:	Date Original Diploma Was I	ssued: Testing Location:
Current Name (if different):	Social Security Number:	Birth Date:
Street Address:	City:	State: Zip:
Daytime Phone Number:	Email:	Fax (if available):
It is important for us to be able to reach you wit	th questions.	
Any additional information		
Please send my GED Verifi	ication Letter by (Check one √) Fax:	: Email:
Name:	earlon Detter by (enter one 1) Turk	
Include One of the Follows	<u> </u>	
<b>Include One of the Follow Email:</b>	ing:	
Lillan.		
Fax Number:		
Any additional information	that would be helpful?	
REQUIRED FOR PROCE	SSING:	
Signature of GED		Date of
Graduate:		Request:
MAIL THIS FORM TO:		
Iowa Department of Education		PLEASE:
Attention: GED Records Specialist		Do not make multiple
Division of Community Colleges and Workforce Preparation		calls or fax multiple
400 € 14 <sup>th</sup> St		Cally VI Tax IIIUIUIVIC

400 E. 14<sup>th</sup> St.

Des Moines, IA 50319-0146

## **FAX:**

515-281-6544

Attention: GED Specialist

## **EMAIL:**

GEDhelp@iowa.gov

Do not make multiple calls or fax multiple copies regarding the same request. We will process your request as quickly as possible. Thank you!

Questions: Please email GEDhelp@iowa.gov or call (515) 281-7308